

**UTILITY PATENT APPLICATION  
TRANSMITTAL UNDER 37 CFR 1.53(b)**

**ATTORNEY DOCKET 85259AJA  
Customer No. 01333**

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA. 22313-1450

**Express Mail Label No.**

**EV 293528583 US**

**Date:** November 18, 2003

**ULTRASONIC SPLICING OF PHOTOGRAPHIC  
FILM STRIPS**

**First Named Inventor (or Application Identifier):**

Thomas M. Smith, et al

Enclosed are:

1. ☒ Specification
2. ☐ Sheet(s) of drawing(s)
3. ☐ Information Disclosure Statement Under 37 CFR 1.97.
4. Combined Declaration for Patent Application and Power of Attorney:
  - 4a. ☒ New (unexecuted)
  - 4b. ☐ Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 11 completed)
5. ☐ Incorporation by Reference (useable if Box 4b is checked)
6. ☐ Assignment of the invention to
7. ☐ Certified copy of a priority
8. ☐ Associate Power of Attorney

☐ Incorporation by Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

☐ Deletion of Inventor(s). Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

10. ☐ If a 111A application prior to examination of the above-identified application, amend the specification at Page 1, after the title, by inserting the following:  
--CROSS REFERENCE TO RELATED APPLICATION  
Reference is made to and priority claimed from U.S. Provisional Application Serial No. , filed , entitled .

**If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:**

11. ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. :
12. ☒ Please address all written communications to Paul A. Leipold, Patent Legal Staff,  
Eastman Kodak Company, 343 State Street, Rochester, NY 14650-2201.  
Please Direct all telephone calls to Andrew J. Anderson at (585) 722-9662.

The filing fee has been calculated as shown below:

FOR:	NO. FILED	NO. EXTRA	RATE	FEE
BASIC FEE				\$ 770
TOTAL CLAIMS	12	- 20 =	-8	x 18 =
INDEPENDENT CLAIMS	1	- 3 =	-2	x 86 =
MULTIPLE DEPENDENT CLAIM PRESENTED				+ 290
				\$ 0
<b>TOTAL</b>				<b>\$ 770</b>

☒ Please charge my Eastman Kodak Company Deposit Account No. **05-0225** in the amount of **\$ 770**

**A duplicate copy of this sheet is enclosed**

☒ The Commissioner is hereby authorized to charge any additional filing fees required under 37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. **05-0225**.

**A duplicate copy of this sheet is enclosed.**

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